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Page 1 of 1

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H11000271025 3)))



H110002710253ABCT

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : AMBAR DIAZ, P.A.
Account Number : I20110000016
Phone : (305)476-8100

Fax Number

: (305)476-8788

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: OM A RITICISEDA @ GDI. COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN NUEVA CUBA EXPRESS INC

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Corporate Filing Menu

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To: 18506176380 P.2 (((H11000271025 3)))

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: NUEVA CUBA E	EXPRESS INC	
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspond	ondence concerning this ma	atter to the following:	
		AMBAR DIAZ	
	N	ame of Contact Person	
		AMBAR DIAZ, P.A.	
		Firm/ Company	
		782 NW 42 AVE SUITE 43 Address	34
		Audicas	
		MIAMI FL 33126	
	Ci	ty/ State and Zip Code	
*****************	0)	maritoelsoda@aol.com	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
	,,,,,,,		
AMBAR DIAZ		at (305) 476-8100
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:
☑ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

3054768788

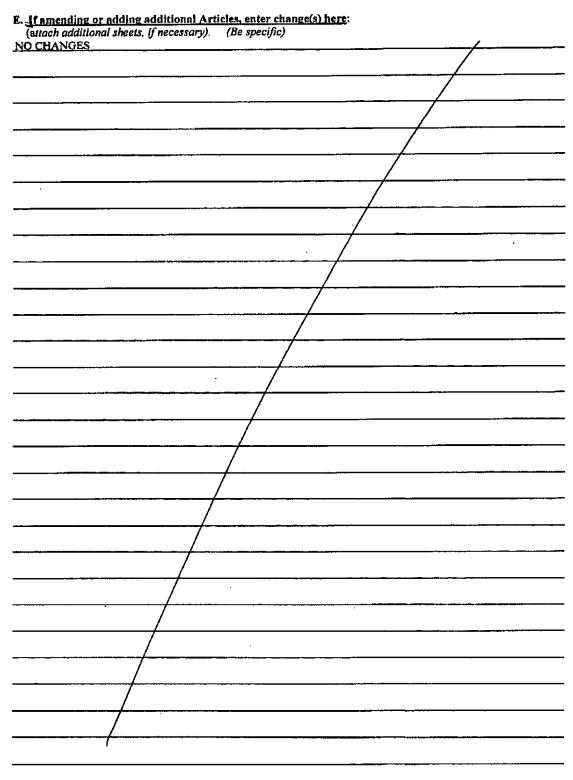
TO:18506176380 P.3 (((H11000271025 3)))

Articles of Amendment to Articles of Incorporation

NUEVA CUBA EXI	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P1100007055	6
(Document Number of Corporation	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation;	•
BELLA ISLA EXP	
The new name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Corpane must contain the word "chartered," "professional associatio	" "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A TELEVISION N/A
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	SSEE, FLOADS
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
Name of New Registered Agent: N/A	
(Florida s	treet address)
New Registered Office Address:	, Florida
(Cit)	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New Registered	Agent, if changing

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the record to b	<u>the Officers and/ore. Please indicate the</u>	<u>r Directors, please l</u> stitle(s), name and a	<u>ist all officers/d</u> ddress for each	<u>irectors of the corporation</u>	on as you now want
(Our database	can index up to 6 of			an 6 officers/directors, pl	ease list them on an
additional sheet	•				
Title(s)	<u>Name</u>		_Ag	dress_	
1)	NO CHAN	IGES			 _
2)				,	
2)					
•					
3)					
					
Λ					
4)		· · · · · · · · · · · · · · · · · · ·			
5)			<u> </u>		
			4		
6					
6)		· · · · · · · · · · · · · · · · · · ·			
If REMOVING	an officer and/or di	rector, please list the	title(s) and nan	ne of the officer/director	to be removed:
Title(s)	<u>Name</u>		Title(a)	Name	
1)	NO CHANGES		4)	4.00	
2)			5)		
3)			6)		
			-		



F. If an amendment provide	s for an exchange, reclassification, or cancellation of issued shares, ng the amendment if not contained in the amendment itself;
(if not applicable, Indic	
NO CHANGES	•
NO CHANGES	
	
The date of each amendment(e) adoption: 11/14/2011
I HE WATE OF CACH AMERICANEIN	s) adoption:
Effective data if anniisahlar	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	n
	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 11/14/	2011 N 📿
Signature	
sele	a director, president or other officer — if directors or officers have not been seted, by an incorporator — if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	HILDA D. FERNANDEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)